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PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/516,833
	Filing Date	December 2, 2004
	First Named Inventor	David Lieberman
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	SCIOPT 3.3-011

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 000530

☒ Please change the correspondence address for the above-identified application to:

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Address

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State

Zip

Telephone

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

David Lieberman

Date

3/18/05

Telephone

718-622-8900

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.



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SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Jonathan Grierson		
Date	4/15/05	Telephone	330-947-3015

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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